



Express Mail Label No: EL592002335US
Date of Deposit: February 9, 2001

Atty. Docket No.: 25436/1340

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

#9

Application of: Cartens, Carsten-Peter
Serial No.: 09/492,590
Filed: January 27, 2000
Entitled: Methods and Compositions for High
Level Expression of a Heterologous
Protein With Poor Codon Usage

Examiner: Leffers

Group Art Unit: 1636

Commissioner for Patents
Washington, D.C. 20231

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AMENDMENT TRANSMITTAL LETTER

Sir:

1. Transmitted herewith is an amendment in response to the Office Action mailed on August 9, 2000 in the above-referenced patent application.

STATUS

2. Applicant is

a small entity.
 other than small entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 CFR 1.136 apply.

Applicant petitions for an extension of time under 37 CFR 1.136

Extension (months)	Fee for other than <u>small entity</u>	Fee for <u>small entity</u>
ONE month	\$110.00	\$55.00
TWO months	\$390.00	\$195.00
THREE months	\$890.00	\$445.00
FOUR months	\$1,390.00	\$695.00
FIVE months	\$1,890.00	\$945.00
	Fee	\$445

If an additional extension of time is required, please consider this a petition therefor.

(a) An extension for _____ has already been secured and the fee paid therefor of \$ _____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request

OR

(b) Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

CLAIMS AS AMENDED		(1)	(2)	(3)		
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT NUMBER EXTRA	RATE	Fee
TOTAL CLAIMS	43	minus	44	0	x \$18	0
INDEPENDENT CLAIMS	7	minus	7	0	x \$80	0
MULTIPLE DEPENDENT CLAIM ADDED	No/Yes				\$270	0
					TOTAL	0
		If applicant has small entity status under 37 CFR 1.9 and 1.27, then divide total fee by 2 and enter amount here.			SMALL ENTITY TOTAL	0

(c) No additional fee for claims is required.

OR

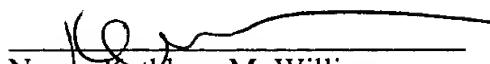
(d) Total additional fee for claims required \$

FEE PAYMENT

5. Attached is a check in the sum of \$445.00

Charge Deposit Account No. 16-0085, Reference No. 25436/1340 any additional necessary fees.
A duplicate of this transmittal is attached.

Respectfully submitted


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